IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ATTY DOCKET : RM-GPG)

APPLICANTS : H. George Pires)

SERIAL NO. : 10/723,604)

FILED : November 25, 2003)

FOR : Diaper Wetness Annunciator System)

Examiner
To Be Assigned

Art Unit
To Be Assigned

Commissioner of Patents and Trademarks
P. O. Box 1450
Alexandria, VA 2233-1450

PRELIMINARY AMENDMENT

S I R :

Prior to examining the above-identified patent application, please amend the application

as follows:

In the Claims:

Please cancel all of the present claims, *i.e.*, claims 1-28;

Please add new claims 29-60, as presented in the annexed Addendum of Claims.

R E M A R K S

Amendments are presented herein to improve the form of the subject application. The

amendments to the application do not add new matter, but serve merely to amend the claims to

specify subject matter that was present in the patent application at the time it was filed.

In view of the foregoing, it is respectfully requested that the Examiner examine the

present application, allow the claims, and pass the application for issue. If the Examiner believes

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number: 10/723,604

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS	28		RATE	FEE	OR	RATE	FEE
FOR	NUMBER FILED	NUMBER EXTRA	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS	28 minus 20=	8	X$ 9=	72.00	OR	X$18=	
INDEPENDENT CLAIMS	6 minus 3 =	3	X43=	129.00	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT		☐	+145=		OR	+290=	
			TOTAL	586.00	OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

M-Date 9-3-04

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	32	Minus	28	= 4	4 X$ 9=	36.00	OR	X$18=	
Independent	8	Minus	6	= 2	2 X43=	86.00	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+145=		OR	+290=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total		Minus		=	X$ 9=		OR	X$18=	
Independent		Minus		=	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+145=		OR	+290=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total		Minus		=	X$ 9=		OR	X$18=	
Independent		Minus		=	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+145=		OR	+290=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

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